

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000007933

**Entity Name:** VALLS RE HOLDINGS, LLC

**Current Principal Place of Business:**

3663 SW 8TH STREET  
PENTHOUSE  
MIAMI, FL 33135

**Current Mailing Address:**

3663 SW 8TH STREET  
PENTHOUSE  
MIAMI, FL 33135 US

**FEI Number:** 46-0624159

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TORNES, JACQUELINE  
3663 SW 8TH STREET  
PENTHOUSE  
MIAMI, FL 33135 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name VALLS, FELIPE A. JR.  
Address 3663 SW 8TH STREET  
PENTHOUSE  
City-State-Zip: MIAMI FL 33135

Title MGRM  
Name VALLS TORNES, LETICIA  
Address 3663 SW 8TH STREET, PENTHOUSE  
City-State-Zip: MIAMI FL 33135

Title MGRM  
Name VALLS EDWARDS, JEANNETTE  
Address 3663 SW 8TH STREET, PENTHOUSE  
City-State-Zip: MIAMI FL 33135

Title MANAGER  
Name TORNES, JACQUELINE  
Address 3663 SW 8TH STREET  
PENTHOUSE  
City-State-Zip: MIAMI FL 33135

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JACQUELINE TORNES

**MANAGER**

**01/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date